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on of Information unless it contains a valid OMB control number.

| Substitute for form 1449A/PTO   | Complete if Known               |             |  |
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| INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary) | Application Number              | 10/578,659  |  |
|   | Filing Date                     | May 9, 2006 |  |
|   | First Named Inventor            | Smith, Euan |  |
|   | Group Art Unit                  | Unknown     |  |
|   | Examiner Name                   | Unknown     |  |
| Sheet 1 of 1  | Attorney Docket No: 1365.105US1 |             |  |

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